

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Mug		9/3/94
O.I.P.E. CLASSIFIER		25	09-09-99
FORMALITY REVIEW	g/	64930	9-15-99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
11	05/12
11	10/01
02	03/03
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15	✓✓✓✓
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Claim	Date
11	05/12
11	10/01
02	03/03
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)